

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE OFFICE ACTION RESPONSE

APPLICANT: Wyatt ATTY. DOCKET NO.: MCO-P-00-001

SERIAL NO.: 09/544,508 GROUP ART UNIT: 3629

FILING DATE: Apr. 6, 2000 EXAMINER: Dixon

TITLE: "A METHOD AND SYSTEM FOR PROVIDING BED AVAILABILITY

INFORMATION ON A COMPUTER NETWORK"

RECEIVED

JAN 1 7 2003

Asst. Commissioner for Patents Washington, DC 20231

SIR:

GROUP 3600

In response to the Office Action dated October 10, 2002, please amend the above-identified application as follows:

Please replace Claim 1 with the following:

1. A method for providing bed availability information to a user wherein the user identifies an available bed for a patient and further wherein the bed availability information includes information on beds at a plurality of healthcare facilities wherein the plurality of healthcare facilities receives the patient based on the bed availability at one of the plurality of healthcare facilities, the method comprising the steps of:

providing a computer network;

providing a database connected to the computer network;

inputting bed availability information for a plurality of healthcare facilities wherein each of the plurality of healthcare facilities have beds and further wherein the bed availability information is input into the database and is accessible by the



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TEL: 773/772-6009

APPLICANT:

Wyatt

GROUP ART UNIT: 3629

SERIAL NO.:

09/544,508

EXAMINER: Dixon

FILING DATE:

April 6, 2000

ATTY, DOCKET NO.:MCO-P-00-001

INVENTION:

"A METHOD AND SYSTEM FOR PROVIDING BED AVAILABILITY

INFORMATION ON A COMPUTER NETWORK"

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Asst. Commissioner for Patents Washington, D.C. 20231

JAN 1 7 2003

SIR:

GROUP 360U

Transmitted herewith is a AMENDMENT for the above-identified application in response to the Office Action dated October 10, 2002.

No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	20	MINUS	20	X 0	X 9.00 X 18.00	0
INDEP. CLAIMS	02	MINUS	03	хо	X 42.00 X 84.00	0
Application amended to contain any multiple dependent claims () YES not previously paid for. (X) NO					\$130.00 \$260.00 ONE TIME	0
			TOTAL ADDITIONAL FEE FOR THIS AMENDMENT		0	

The Asst. Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to Deposit Acct. No. 50-0595. <u>A duplicate of this sheet is enclosed for this purpose.</u>

When phoning re this application, please call 773/772-8008

Brian M. Mattson Reg. No. 35,018

CERTIFICATE OF MAILING

Brian M. Mattson Reg. No. 35,018